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(Re	questor's Name)	<u> </u>
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PICK-UP	☐ WAIT	MAIL
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Special Instructions to	Filing Officer:	

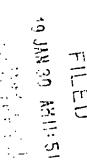
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Ed & Pat's House Watching LLC.
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Paul Patrick Riess Name of Person
Firm/Company
1808 Sunrise Dr. Address
Sebring, FL 33872 City/State and Zip Code
F-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Pat Riest at (603) 481 - 0196 Name of Person Area Code Daytime Telephone Number
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \$

MAILING ADDRESS:

TO:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

. ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Ed & PAT'S House Wa	tching, LC.	
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Jability Company)	13/2016
(Name of the Limited Liability Compa (A Florida Limited I The Articles of Organization for this Limited Liability Company	were filed on 11 04 16	and assigned
Florida document number 41600000953	, ,	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
Pat's Hoose Watching LLC. The new name must be distinguishable and contain the words Limited Liabil		
The new name must be distinguishable and contain the words. Limited Liabil		
Enter new principal offices address, if applicable:	1808 Sunrise Dr	
(Principal office address MUST BE A STREET ADDRESS)	1808 Sunaise Dr Sebain FC 338	372
		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		五五日
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		- r n
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	Florida	Zip Code
Non-Bouletonal County Clauseum (C. Longia D. C. C. L. C.	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

<u>Title</u>	<u>Name</u>	Address	Type of Action
			
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Filing Fee: \$25.00